ISSUE SLIP STAPLE AREA (for additional cross references) **POSITION INITIALS** ID NO. DATE **FEE DETERMINATION** O.I.P.E. CLASSIFIER **FORMALITY REVIEW INDEX OF CLAIMS** Rejected Non-elected Allowed Interference (Through numeral) Canceled A Appeal Restricted O Objected Date Claim Date Claim Date Final Original Final Original ;6

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If more than 150 claims or 10 actions staple additional sheet here

(LEFT INSIDE)